

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

1 | SERIAL NO

**APPLICANT'S**

#### FLUKE 8410

2/17/65

CLAIMS	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	END	DEP	END	DEP	END	DEP
1	1		1			
2		1		1		
3		1		1		
4		1		1		
5		2		2		
6		2		2		
7		2		2		
8		1		1		
9		1		1		
10		1		1		
11		1		1		
12		1		1		
13		2		2		
14		2		2		
15		2		2		
16		2		2		
17	1		1	2		
18		1		1		
19		1		1		
20		1		1		
21		1		1		
22		1		1		
23		2		2		
24		2		2		
25		2		2		
26		1		1		
27		1		1		
28	1		1	1		
29		1		1		
30						
31						
32						
33						
34						
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37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3		3			
TOTAL DEP.	36	1	36	1		
TOTAL CLAIMS	39		39			